### Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Joseph	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Solak	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you hav used in the last 8 years	re	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4205	

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29

Document Page 2 of 56 Desc Main

Debtor 1 Joseph Solak

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	5679 W Higgins, Apt 1W	If Debtor 2 lives at a different address:			
		Chicago, IL 60630  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 3 of 56

Debtor 1 Joseph Solak Case number (if known)

ar	t 2: Tell the Court About	our E	3ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Requir</i> page 1 and check the app	red by 11 U.S.C. § 342(b) for Indivi ropriate box.	iduals Filing for Bankruptcy	
	choosing to file under	Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
			·					
3.	How you will pay the fee		about how yo	u may pay. Typi attorney is subn	cally, if you are paying the	e check with the clerk's office in yo fee yourself, you may pay with ca ur behalf, your attorney may pay w	sh, cashier's check, or money	
					allments. If you choose the (Official Form 103A).	is option, sign and attach the Appl	lication for Individuals to Pay	
			but is not requapplies to you	uired to, waive y ur family size an	our fee, and may do so on d you are unable to pay the	s option only if you are filing for Ch ly if your income is less than 150% e fee in installments). If you choos d (Official Form 103B) and file it wi	6 of the official poverty line that e this option, you must fill out	
<b>)</b> .	Have you filed for bankruptcy within the	■ N	0.					
	last 8 years?	ПΥ	es.					
			District		When	Case numbe	r	
			District		When	Case numbe	r	
			District		When	Case numbe	r	
10.	Are any bankruptcy	■ N						
	cases pending or being filed by a spouse who is							
	not filing this case with you, or by a business partner, or by an affiliate?		es.					
			Debtor			Relationship to	o you	
			District		When	Case number,	if known	
			Debtor			Relationship to	you	
			District		When	Case number,	if known	
11.	Do you rent your	ПΝ	lo. Go to li	ine 12.				
	residence?	Y	es. Has yo	ur landlord obta	ined an eviction judgment	against you and do you want to sta	ay in your residence?	
			•	No. Go to line 1	12.			
			_		tial Statement About an Ev	riction Judgment Against You (For	m 101A) and file it with this	

Document Page 4 of 56 Case number (if known) Debtor 1 Joseph Solak Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 5 of 56

Debtor 1 Joseph Solak Document Page 5 of 56 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 6 of 56

Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$500,000,001 - \$1 billion **\$0 - \$50,000** □ \$1,000,001 - \$10 million estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph Solak Signature of Debtor 2 Joseph Solak Signature of Debtor 1 Executed on October 14, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Joseph Solak

Debtor 1 Joseph Solak Document Page 7 of 56 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David (	Gallagher	Date	October 14, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
David Gal	lagher		
Printed name			
Upright La	aw LLC		
Firm name			
79 West M	lonroe		
Fifith Floo	r		
Chicago, I	L 60603		
Number, Street,	City, State & ZIP Code		
Contact phone	312-546-4264	Email address	dgallagher@uprightlaw.com
6295024			
Bar number & S	tate		

		Docume	ent Page 8 of 56	
Fill in this infor	mation to identify your	case:		
Debtor 1	Joseph Solak			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	esots
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	45,239.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	45,239.00
Ра	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	59,994.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	58,331.00
	Your total liabilities	\$	118,325.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,839.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,814.81
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Joseph Solak Debtor 1 Joseph Solak Debtor 1 Joseph Solak Debtor 1 Joseph Solak Debtor 1 Joseph Solak

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$\_\_\_\_\_5,115.35

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 10 of 56 Fill in this information to identify your case and this filing: Debtor 1 Joseph Solak Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse, if filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Jeep Who has an interest in the property? Check one Make: 3 1 Do not deduct secured claims or exemptions. Put **Grand Cherokee** the amount of any secured claims on Schedule D: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Laredo Model: 2015 Debtor 2 only Current value of the Current value of the 10,100 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information At least one of the debtors and another Value According to KBB \$37,200.00 \$37,200.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chrysler Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: 200 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the 65,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another

Official Form 106A/B Schedule A/B: Property page 1

☐ Check if this is community property

(see instructions)

Value According to KBB

car

Jointly Signed with Brother, his

\$5,125.00

\$10,250.00

		Case	16-32841	Doc 1		Entered 10/14/16 13	:56:29	Desc Main
D	ebtor 1	Joseph	n Solak		Document	Page 11 of 56 Case number	er (if known)	
						cles, other vehicles, and access owmobiles, motorcycle accessorie		
	■ No							
	☐ Yes							
5						om Part 2, including any entries		\$42,325.00
P	art 3: Des	scribe You	r Personal and Ho	ousehold Items	<b>s</b>			
	·		e any legal or eq s and furnishing		est in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ο.	Example		appliances, furniti		nina, kitchenware			
	□ No ■ Yes	Describe.						
	<b>—</b> 103.	DC3011DC.						
			House	nold Goods	and Furnishings			\$1,750.00
7.	■ No	es: Televis	ng cell phones, c		stereo, and digital equip ia players, games	ment; computers, printers, scanno	ers; music c	ollections; electronic devices
8.	■ No	es: Antiqu other o	es and figurines; collections, memo			oks, pictures, or other art objects;	stamp, coin	or baseball card collections;
	☐ Yes.	Describe.						
9.	Example  No	es: Sports	al instruments		other hobby equipment; t	oicycles, pool tables, golf clubs, sl	kis; canoes :	and kayaks; carpentry tools;
			••••					
10	Firearm Examp  ■ No		s, rifles, shotguns	s, ammunitior	, and related equipment			
	☐ Yes.	Describe.						
11	□ No			, leather coats	s, designer wear, shoes,	accessories		
			Necess	ary Wearin	g Apparel			\$500.00
	■ No □ Yes.  Non-fai Examp ■ No	Describe. rm anima	 I <b>s</b> , cats, birds, hors		engagement rings, wedd	ding rings, heirloom jewelry, watch	nes, gems, ç	gold, silver
		Describe.						

page 2

Debtor 1		e 16-32841 h Solak	Doc 1	Filed 10/14/16 Document	Entered 10/14/2 Page 12 of 56	16 13:56:29 e number (if known)	Desc Main
14 <b>Anv</b>			old items vo	u did not already list in	ncluding any health aids	, ,	
■ No	•	mai and nousei	iola items yo	a aid not aiready not, ii	icidaling any nearth alas	you did not not	
☐ Ye	s. Give spe	cific information.					
				om Part 3, including a	ny entries for pages you	have attached	\$2,250.00
Part 4:	Describe You	ur Financial Assets	S				
Do you	own or hav	e any legal or e	quitable inter	est in any of the follow	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Mone			our home, in a safe depo	osit box, and on hand when	n you file your petitic	n
	instit	cking, savings, or		al accounts; certificates counts with the same ins	f deposit; shares in credit titution, list each.	unions, brokerage h	ouses, and other similar
	S			Institution n	ame:		
		17.1.		Cash on I	nand at time of filing		\$2.00
		17.2.	Checking	PNC Bank	« Account		\$150.00
		17.3.	Savings	Municipa	Credit Union		\$500.00
		17.4.	Savings	PNC Bank	« Account		\$12.00
Exai ■ No	mples: Bond	·		ith brokerage firms, mor	ey market accounts		
19. <b>Non-</b>	publicly tra				orporated businesses, in	cluding an interest	in an LLC, partnership, and
■ No □ Ye		ecific information Nan	about them ne of entity:		% (	of ownership:	
Neg Non ■ No	otiable instr -negotiable	<i>ument</i> s include p	ersonal check hose you canı	· ·	egotiable instruments nissory notes, and money by signing or delivering the		
		Issu	ier name:				
	mples: Inter	ension account ests in IRA, ERIS		1(k), 403(b), thrift saving	s accounts, or other pensi	on or profit-sharing p	olans
■ Ye	s. List each	account separate	ely. of account:	Institution n	ame:		

Official Form 106A/B Schedule A/B: Property page 3

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Page 13 of 56

Case number (if known)

Document Debtor 1 Joseph Solak

		Pension	City of Chi	cago	Unknown
22	Examples: Agreeme	used deposits you have ma		nue service or use from a company ric, gas, water), telecommunications	s companies, or others
	■ No □ Yes		Institution na	me or individual:	
23	•	ct for a periodic payment of	f money to you, either for li	fe or for a number of years)	
	■ No □ Yes	Issuer name and descript	tion.		
24		ation IRA, in an account 1), 529A(b), and 529(b)(1).		ram, or under a qualified state tu	ition program.
	Yes	Institution name and desc	cription. Separately file the	records of any interests.11 U.S.C.	§ 521(c):
25	5. Trusts, equitable or	future interests in prope	erty (other than anything	listed in line 1), and rights or po	wers exercisable for your benefit
		information about them			
26	Examples: Internet of No	t, trademarks, trade secredomain names, websites, p			
27	<ul> <li>Licenses, franchise         Examples: Building         No</li> </ul>	es, and other general inta		holdings, liquor licenses, professior	nal licenses
N	loney or property owe	ed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28	3. Tax refunds owed t	o you			
	■ No □ Yes. Give specific	information about them, inc	cluding whether you alread	dy filed the returns and the tax year	S
29	<ul><li>Pamily support</li></ul>	, , , , , ,	usal support, child suppor	t, maintenance, divorce settlement,	property settlement
30	benefits; ■ No	vages, disability insurance unpaid loans you made to	payments, disability benef someone else	its, sick pay, vacation pay, workers	s' compensation, Social Security
24	Yes. Give specific				
31	<ol> <li>Interests in insuran         Examples: Health, d         □ No</li> </ol>		health savings account (H	SA); credit, homeowner's, or renter	's insurance
	Yes. Name the ins	urance company of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
		Term Life Insu	rance with Employer		\$0.00

Official Form 106A/B Schedule A/B: Property page 4 Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Page 14 of 56
Case number (if known) Document Joseph Solak

Deb	tor 1	Joseph Solak	Doddinent	r age 14 or	Case number (if known)	
	If you a	erest in property that is due you fare the beneficiary of a living trust, exne has died.			are currently entitled to rec	eive property because
	Yes.	Give specific information				
		against third parties, whether or les: Accidents, employment dispute:			and for payment	
		Describe each claim				
_	Other o	ontingent and unliquidated claim	s of every nature, including	counterclaims	of the debtor and rights to	o set off claims
		Describe each claim				
	Any fin I <sub>No</sub>	ancial assets you did not already	list			
		Give specific information				
36.		he dollar value of all of your entrient 4. Write that number here				\$664.00
Part	5: Des	scribe Any Business-Related Property	You Own or Have an Interest Ir	n. List any real esta	ate in Part 1.	
	-	own or have any legal or equitable inte	rest in any business-related pr	operty?		
_		o to line 38.				
Part		scribe Any Farm- and Commercial Fish ou own or have an interest in farmland, lis		or Have an Interes	st In.	
46. <b>[</b>	_	own or have any legal or equitab	le interest in any farm- or c	ommercial fishin	g-related property?	
	_	Go to Part 7.  Go to line 47.				
	<b>—</b> 103.	GO to line 47.				
Part	7:	Describe All Property You Own or Ha	eve an Interest in That You Did	Not List Above		
		have other property of any kind y les: Season tickets, country club me				
	No Yes	Give specific information				
54.	Add t	he dollar value of all of your entrie	es from Part 7. Write that nu	ımber here		\$0.00
Part	8:	List the Totals of Each Part of this For	m			
55.	Part 1	: Total real estate, line 2				\$0.00
56.		: Total vehicles, line 5		\$42,325.00		
57.		: Total personal and household it	ems, line 15	\$2,250.00		
58.		: Total financial assets, line 36		\$664.00		
59.		: Total business-related property,		\$0.00		
60.		: Total farm- and fishing-related p		\$0.00		
61.		: Total other property not listed, I		\$0.00	_	
62.	Total	personal property. Add lines 56 th	ough 61	\$45,239.00	Copy personal property	total <b>\$45,239.00</b>
63.	Total	of all property on Schedule A/B. A	dd line 55 + line 62			\$45,239.00

		Docume	III I duc 13 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Joseph Solak			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$37,200.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,750.00		\$1,750.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$2.00		\$2.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$150.00		\$150.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$37,200.00 \$1,750.00 \$2.00	\$1,750.00 \$150.00 \$150.00 \$150.00	\$37,200.00  \$37,200.00  \$1,00% of fair market value, up to any applicable statutory limit  \$1,750.00  \$100% of fair market value, up to any applicable statutory limit  \$500.00  \$2,400.00  \$1,750.00  \$1,750.00  \$100% of fair market value, up to any applicable statutory limit  \$500.00  \$100% of fair market value, up to any applicable statutory limit  \$2.00  \$2.00  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 16 of 56

Debtor 1 Joseph Solak

Description: Case number (if known)

ef description of the property and line on nedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
<u> </u>	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
e nom <i>Schedule AVD</i> . 17.3			100% of fair market value, up to any applicable statutory limit		
_	\$12.00		\$12.00	735 ILCS 5/12-1001(b)	
e nom <i>schedule A/D.</i> 17.4			100% of fair market value, up to any applicable statutory limit		
	Unknown		100%	735 ILCS 5/12-1006	
e nom <i>schedule A/D.</i> 2111			100% of fair market value, up to any applicable statutory limit		
e you claiming a homestead exemption bject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
		vings: Municipal Credit Union e from Schedule A/B: 17.3  vings: PNC Bank Account e from Schedule A/B: 17.4  syou claiming a homestead exemption of more than \$160,37	vings: Municipal Credit Union e from Schedule A/B: 17.3  vings: PNC Bank Account e from Schedule A/B: 17.4  pnsion: City of Chicago e from Schedule A/B: 21.1  cyou claiming a homestead exemption of more than \$160,375?	vings: Municipal Credit Union e from Schedule A/B: 17.3  \$500.00  \$500.00  \$500.00  \$100% of fair market value, up to any applicable statutory limit  vings: PNC Bank Account e from Schedule A/B: 17.4  \$12.00  \$100% of fair market value, up to any applicable statutory limit  Unknown  \$100% of fair market value, up to any applicable statutory limit  100% of fair market value, up to any applicable statutory limit	

		Document	Page 1	.7 of 56		
Fill in this information to id	dentify you	r case:				
Debtor 1 Joseph	h Solak					
First Name		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Name	Э	Middle Name	Last Name			
United States Bankruptcy Co	ourt for the	NORTHERN DISTRICT OF ILLIN	NOIS			
Ormod Otatos Barmruptoy Ot	ourt for the.	NORTHER PIOTRICI OF IEEE	1010			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form 100D						
Official Form 106D						
Schedule D: Cre	editors	Who Have Claims S	ecure	ed by Propert	y	12/15
Do an complete and accounts a	a nasaible 16	i ture married manula are filing to gether	- bath are (	avally recommodule for a		tion 16 mars once
		two married people are filing together ut, number the entries, and attach it to				
number (if known).	• ,	,				
1. Do any creditors have claims	s secured by	your property?				
☐ No. Check this box a	nd submit th	is form to the court with your other s	chedules.	You have nothing else t	o report on this form.	
Yes. Fill in all of the in				•		
		elow.				
Part 1: List All Secured	Claims			. Column A	Column B	Column C
		nore than one secured claim, list the credi		ely		
		a particular claim, list the other creditors i al order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		•		value of collateral.	claim	If any
2.1 Ally Financial		Describe the property that secures the		\$44,777.00	\$37,200.00	\$7,577.00
Creditor's Name		2015 Jeep Grand Cherokee La	aredo			
		10,100 miles				
		Value According to KBB As of the date you file, the claim is: Cl	heck all that			
Po Box 380901	· <b>-</b> 400	apply.	look all triat			
Bloomington, MN 5	5438	Contingent				
Number, Street, City, State & 2	Zip Code	Unliquidated				
1411 (1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Disputed				
Who owes the debt? Check of	one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as me	ortgage or s	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mech	anic's lien)			
At least one of the debtors a		Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	to a	☐ Other (including a right to offset)				
community debt						
Оре	ened					
	15 Last					
Act			er 7480			
Date debt was incurred 9/22	2/16	Last 4 digits of account number	r /400	<u> </u>		
2.2 Ally Financial		Describe the property that secures the		\$15,217.00	\$10,250.00	\$4,967.00
Creditor's Name		2013 Chrysler 200 65,000 mile	<b>?</b> S			
		Value According to KBB				
		Jointly Signed with Brother, h	nie car			
D D 000004		As of the date you file, the claim is: C				
Po Box 380901	5420	apply.				
Bloomington, MN 5		Contingent				
Number, Street, City, State & 2	zip Code	Unliquidated				
Who owes the debt? Check of	nne	Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	AIG.	_				
Debtor 2 only		<ul> <li>An agreement you made (such as me car loan)</li> </ul>	ortgage or s	ecured		
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mech	nanic'e lion\			
At least one of the debtors at	nd another	☐ Judgment lien from a lawsuit	STILO O HOLL)			

Official Form 106D

At least one of the debtors and another

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 18 of 56

Debtor 1 Joseph	n Solak		Case number (if know)	
First Name	Middle Na	ame Last Name		
☐ Check if this clair community debt	m relates to a	Other (including a right to offset)		_
Date debt was incurr	Opened 06/15 Last Active 9/16/16	Last 4 digits of account number		
Add the dollar valu	e of your entries in C	olumn A on this page. Write that number l	r here: \$59,994.00	
If this is the last pa		the dollar value totals from all pages.	\$59,994.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in t	this informatio	n to identify your o	Documer	nt Page 1	9 of 56	
Debtor						
Deptoi		oseph Solak st Name	Middle Name	Last Name		
Debtor	2					
(Spouse i	if, filing) Fir	st Name	Middle Name	Last Name		
United	States Bankrup	tcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Case n						☐ Check if this is an
						amended filing
Officia	al Form 10	)6E/F				
			ho Have Unsecu	red Claims		12/15
Schedule Schedule left. Atta- name an	e G: Executory C e D: Creditors W ich the Continual id case number (	Contracts and Unexp ho Have Claims Section Page to this pag if known).	ired Leases (Official Form 10 ured by Property. If more spa e. If you have no information	6G). Do not include ce is needed, copy	any creditors with partially sethe Part you need, fill it out, r	roperty (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
Part 1:		our PRIORITY Un				
	-	ve priority unsecure	d claims against you?			
	No. Go to Part 2.					
	Yes.					
Part 2:	List All of Y	our NONPRIORIT	Y Unsecured Claims			
3. Do	any creditors ha	ve nonpriority unsec	ured claims against you?			
	No. You have not	hing to report in this pa	art. Submit this form to the cour	rt with your other sch	edules.	
■ 、	Yes.					
4. List	t all of your nonp ecured claim, list n one creditor hold	the creditor separately	for each claim. For each claim	listed, identify what	type of claim it is. Do not list cla	or has more than one nonpriority nims already included in Part 1. If more aims fill out the Continuation Page of
						Total claim
4.1	Amex		Last 4 digits of	of account number	5513	\$2,074.00
	Nonpriority Cred Correspond				Opened 03/16 Last A	Activo
	Po Box 9815		When was the	e debt incurred?	10/10/16	Clive
	El Paso, TX	79998				
		City State ZIp Code	As of the date	you file, the claim	is: Check all that apply	
		he debt? Check one.				
	Debtor 1 only	/	☐ Contingent			
	Debtor 2 only	/	☐ Unliquidate	ed		
	Debtor 1 and	Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and and	illoi	PRIORITY unsecure	d claim:	
		s claim is for a comr				
	debt Is the claim sub	oject to offset?	☐ Obligations report as priori		aration agreement or divorce that	at you did not
	■ No		☐ Debts to pe	ension or profit-shari	ng plans, and other similar debt	S
	☐ Yes		Other Spe	cify Credit Care	d	

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 20 of 56

Debtor 1 Joseph Solak Case number (if know) 4.2 Avant Credit, Inc. Last 4 digits of account number 5045 \$0.00 Nonpriority Creditor's Name 640 N La Salle St Opened 05/15 Last Active When was the debt incurred? Suite 535 6/18/15 Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify 4.3 Capital One 6894 Last 4 digits of account number \$3,416.00 Nonpriority Creditor's Name Opened 04/11 Last Active Po Box 30285 When was the debt incurred? 7/07/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Credit Card Other. Specify 4.4 **Capital One** Last 4 digits of account number 8950 \$1,036.00 Nonpriority Creditor's Name Opened 11/08 Last Active Po Box 30285 When was the debt incurred? 3/02/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Entered 10/14/16 13:56:29 Case 16-32841 Doc 1 Filed 10/14/16 Desc Main

Document Page 21 of 56 Debtor 1 Joseph Solak Case number (if know) 4.5 **Capital One Auto Finance** Last 4 digits of account number 1001 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 07/12 Last Active When was the debt incurred? Po Box 30258 5/08/13 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Automobile 4.6 **Chase Card Services** Last 4 digits of account number 1817 \$4,822.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 03/16 Last Active Po Box 15298 When was the debt incurred? 7/07/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 Citibank / Sears Last 4 digits of account number 2734 \$0.00 Nonpriority Creditor's Name Citicorp Credit Services/Attn: Opened 11/23/07 Last Active Centraliz When was the debt incurred? 6/07/12 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

■ No ☐ Yes

■ Other. Specify Credit Card

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 22 of 56

Debtor 1 Joseph Solak Case number (if know) 4.8 Citibank North America Last 4 digits of account number 1658 \$3,128.00 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 11/10 Last Active 8/03/16 Bankrup When was the debt incurred? Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card T Yes 4.9 Citibank/The Home Depot Last 4 digits of account number 1528 \$514.00 Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Opened 06/15 Last Active **Bankruptcy** When was the debt incurred? 9/30/16 Po Box 790040 S Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 City of Chicago EMS 4205 \$934.00 Last 4 digits of account number Nonpriority Creditor's Name 33589 Treasury Ctr. When was the debt incurred? 2016 Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 23 of 56

Debtor 1 Joseph Solak Case number (if know) 4.1 \$0.00 Comenity Bank/Carsons 0567 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/13 Last Active Po Box 182125 When was the debt incurred? 2/08/14 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 **Discover Financial** 6791 \$1.037.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/15 Last Active Po Box 3025 When was the debt incurred? 3/24/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.1 First National Bank 8628 \$4,575.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/16 Last Active Attn: FNN Legal Dept 1620 Dodge St Mailstop Code 3290 When was the debt incurred? 7/07/16 Omaha, NE 68191 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

Entered 10/14/16 13:56:29 Case 16-32841 Doc 1 Filed 10/14/16 Desc Main

Document Page 24 of 56 Debtor 1 Joseph Solak Case number (if know) 4.1 4023 \$0.00 **Ford Credit** Last 4 digits of account number 4 Nonpriority Creditor's Name **National Bankruptcy Service Center** Opened 11/09/08 Last Active 6/06/10 Po Box 62180 When was the debt incurred? Colorado Springs, CO 80962 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Lending Club Corp** 8297 \$10,367.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 71 Stevenson St Opened 6/16/15 Last Active Suite 300 When was the debt incurred? 7/25/16 San Francisco, CA 94105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.1 **Loan Depot** 4205 \$14,500.00 6 Last 4 digits of account number Nonpriority Creditor's Name 26642 Towne Centre Drive When was the debt incurred? 2016 Foothill Ranch, CA 92610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

Official Form 106 E/F

■ No

☐ Yes

■ Other. Specify Consumer

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Entered 10/14/16 13:56:29 Case 16-32841 Doc 1 Filed 10/14/16 Desc Main

Document Page 25 of 56 Debtor 1 Joseph Solak Case number (if know) 4.1 \$0.00 Merrick Bank 3794 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/05 Last Active Po Box 9201 2/14/10 When was the debt incurred? Old Bethpage, NY 11804 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Rcs/michael Hill 9961 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 10/13 Last Active 30 Oakbrook Ctr When was the debt incurred? 5/01/15 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Charge Account** Other, Specify 4.1 4205 \$934.00 Sweedish Covenant Hospital Last 4 digits of account number Nonpriority Creditor's Name 5145 N California Ave When was the debt incurred? 2016 Chicago, IL 60625 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

Other. Specify

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Medical

Is the claim subject to offset?

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 26 of 56
Case number (if know)

Debto	r 1 _Joseph Solak		Case number (if know)	
4.2	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	3755	\$2,324.00
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number	8326	\$3,972.00
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 12/07 Last Active 5/25/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.2	Synchrony Bank/QVC  Nonpriority Creditor's Name	Last 4 digits of account number	2612	\$334.00
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 10/14 Last Active 7/08/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Charge Acc	count	

Debtor 1	Joseph S	olak	Document Page 2	7 of 50 Case no	6 umber (if kn	now)	
4.2	Synchrony	Bank/Sams	Last 4 digits of account number	4475			\$2,386.00
	Nonpriority Cred	ditor's Name		_			
	Po Box 965 Orlando, FL		When was the debt incurred?	7/08/1		Last Active	-
_	Number Street (	City State ZIp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that appl	у	
	■ Debtor 1 onl	V	☐ Contingent				
	☐ Debtor 2 onl	v	☐ Unliquidated				
	Debtor 1 and	•	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
	debt	bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agr	reement or o	livorce that you did not	
	■ No	.,	Debts to pension or profit-sharing	ng plans, a	and other sin	nilar debts	
	☐ Yes		■ Other. Specify Charge Ac	•		a. dobto	
							-
<del>-</del>		Bank/Walmart	Last 4 digits of account number	4940			\$1,978.00
	Nonpriority Cred	ditor's Name		Onon	ad 11/11	Last Active	
	Po Box 965 Orlando, FL		When was the debt incurred?	1/26/1		Last Active	-
		City State Zlp Code	As of the date you file, the claim	is: Check	all that appl	у	
	Who incurred t	the debt? Check one.					
	Debtor 1 onl	у	☐ Contingent				
	☐ Debtor 2 onl	y	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	aration agr	reement or o	divorce that you did not	
	■ No		☐ Debts to pension or profit-sharing	ng plans, a	and other sin	nilar debts	
	☐ Yes		Other. Specify Charge Ac	count			_
D (A	<b>-</b> 111.00						
Part 3:		s to Be Notified About a Debt					
is tryin have m	g to collect fro nore than one c	m you for a debt you owe to som	out your bankruptcy, for a debt that eone else, list the original creditor in ou listed in Parts 1 or 2, list the add submit this page.	n Parts 1 o	or 2, then lis	st the collection agenc	y here. Similarly, if you
Part 4:	Add the Ar	mounts for Each Type of Uns	ecured Claim				
	he amounts of unsecured cla		s. This information is for statistical I	eporting	purposes o	only. 28 U.S.C. §159. Ad	d the amounts for each
						Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	_
	otal ims						
from Pa		Taxes and certain other debts y	ou owe the government	6b.	\$	0.00	_
	6c.	Claims for death or personal in	• •	6c.	\$	0.00	_
	6d.	Other. Add all other priority unsec	cured claims. Write that amount here.	6d.	\$	0.00	_
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	_ ]
	6f.	Student loans		6f.	\$	Total Claim 0.00	
T	otal				<b>*</b>	0.00	_

Official Form 106 E/F

claims

from Part 2

6g.

\$

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

0.00

Desc Main Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Page 28 of 56 Case number (if know) Document

Debtor 1 Joseph Solak

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 58,331.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 58,331.00

		Beganne	HE FAGO EO OFOO	
Fill in this info	rmation to identify your	case:		
Debtor 1	Joseph Solak			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Don 5679 W Higgins Chicago, IL 60630	\$1,020.00

		Documen	t Page 30 of	56	-
Fill in this info	rmation to identify your	case:			
Debtor 1	Joseph Solak				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	Bankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H e H: Your Cod	ebtors			12/15
people are filin ill it out, and n your name and	g together, both are equ umber the entries in the case number (if known)	ally responsible for supply	ving correct informatio he Additional Page to	n. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
_	······································	,			
□ No					
Yes					
		lived in a community prop Nevada, New Mexico, Puer			rty states and territories include )
■ No. Go t □ Yes. Did		use, or legal equivalent live v	with you at the time?		
in line 2 aç	gain as a codebtor only i )), Schedule E/F (Official	f that person is a guaranto	r or cosigner. Make ຣເ	ire you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor Number, Street, City, State and Zl	P Code		Column 2: The ci	reditor to whom you owe the debt les that apply:
9394 Arlir	n Solak I Barley Mills Road ngton, TN 38002 her's Car			■ Schedule D, □ Schedule E/f □ Schedule G Ally Financial	-, line

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 31 of 56

	in this information to										
Det	otor 1	Joseph Sola	IK .								
	otor 2 buse, if filing)					_					
Uni	ted States Bankrupt	cy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number			-					ed filing ent showing	g postpetition	
O:	fficial Form	1061					_			ollowing date:	
	chedule I: \		omo				N	//M / DD/ \	YYYY		12/1
spo	use. If you are sepa ch a separate shee	arated and you t to this form. ( Employment	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not incl	ude infor	mati	on abou	t your sp	ouse. If mo	ore space is	needed,
	information.	ymone		Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional employers.		Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Empl	oyed employed		
			Occupation	Truck Driver							
	Include part-time, self-employed wor		Employer's name	City of Chicag	0						
	Occupation may in or homemaker, if it		Employer's address	121 N. Lasalle Chicago, IL 60							
			How long employed t	here? 18 yea	ars			_			
Par	Give Deta	ails About Mor	thly Income								
spou If yo	use unless you are s ou or your non-filing s	eparated. spouse have mo	ate you file this form. If	, 3	•	Í	ŕ	·	•	,	J
more	e space, attach a se	parate sheet to	this form.				For De	htor 1	For Del	otor 2 or	
							1 Of De	DEOI 1		ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	5	,696.00	\$	N/A	
3.	Estimate and list	monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	5,6	96.00	\$	N/A	

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 32 of 56

Deb	tor 1	Joseph Solak	-	(	Case	number (if known	)				
					Fo	r Debtor 1			Debtor : filing s		
	Сор	y line 4 here	4.		\$	5,696.00	)	\$	illing 3	N/A	_
5.	l ist	all payroll deductions:									_
0.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	1,134.82	,	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$-	484.16	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$-	0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$	0.00	_	\$		N/A	
	5e.	Insurance	5e	€.	\$	150.36	_	\$		N/A	
	5f.	Domestic support obligations	5f		\$	0.00	)	\$		N/A	
	5g.	Union dues	50	J.	\$	87.00	)	\$		N/A	-
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	0.00	) -	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,856.34	Ŀ	\$		N/A	<u>.</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,839.66	5	\$		N/A	<u>.                                    </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
	OL	monthly net income. Interest and dividends	88		\$_ \$	0.00	_	\$		N/A	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b		· –	0.00				N/A	_
	0.1	settlement, and property settlement.	80		\$_	0.00		\$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8c 8e		\$_ \$	0.00		\$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	_	\$_	0.00	)	\$		N/A	_
	8g.	Pension or retirement income	80		\$_	0.00		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r	1.+	\$_	0.00		⊦ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	0.00	)	\$		N/	A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		3,839.66 +	\$		N/A	= \$	3.839.66
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ_		3,033.00	Ψ_ 		IVA		3,033.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	depe						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	3,839.66
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No. Yes Eynlain:									

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 33 of 56

<b>E</b> :III	in this informat	tion to identify w	211 22221					
FIII	in this informat	tion to identify yo	our case.					
Deb	otor 1	Joseph Sola	ık			Che	ck if this is:	
							An amended filing	
l	otor 2							ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
$\bigcirc$	fficial Fo	rm 106 l						
S	chedule	J: Your	Exper	ises				12/15
info	ormation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Par	t 1: Descr	ibe Your House	ehold					
1.	Is this a join	nt case?						
	■ No. Go to		•	ata kawa shakilo				
			ın a separ	ate household?				
	□ No	_	st file Offici	al Form 106J-2, Expenses	for Separate House	hold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents i	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include		No				
		f people other t d your depende		Yes				
	yoursen and	a your depende	iiio r					
Par	t 2: Estima	ate Your Ongoi	ng Monthl	y Expenses				
exp	imate your ex enses as of a plicable date.	penses as of your date after the	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo elemental <i>Schedule</i>	orm as a si J, check t	upplement in a Cha he box at the top o	pter 13 case to report f the form and fill in the
Incl	lude exnense	s naid for with	non-cash	government assistance i	f vou know			
	•	•		cluded it on Schedule I: \	•			
(Off	ficial Form 10	6I.)					Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4. 3	\$	1,020.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$	0.00
	4c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c.	\$	0.00
	4d. Home	owner's associa	tion or cond	dominium dues		4d.	·	0.00
5.	Additional n	nortgage navm	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 34 of 56

Deb	tor 1	Joseph Solak	Case num	ber (if known)	
6.	Utiliti	es:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	245.00
	6b.	Water, sewer, garbage collection	6b.		0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		570.00
	6d.	Other. Specify:	6d.	· ·	0.00
7.		and housekeeping supplies	_ <sub>7.</sub>	\$	350.00
8.		care and children's education costs	8.	\$	0.00
9.		ing, laundry, and dry cleaning	9.		50.00
-		onal care products and services	10.	·	50.00
		cal and dental expenses	11.		180.00
		sportation. Include gas, maintenance, bus or train fare.		<u> </u>	100.00
		t include car payments.	12.	\$	350.00
13.		tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.		table contributions and religious donations	14.	\$	20.00
15.	Insur	ance.			
	Do no	t include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	157.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.	Taxe	Do not include taxes deducted from your pay or included in lines 4 or 20.	_		
	Spec	·	16.	\$	0.00
17.		Ilment or lease payments:		_	
		Car payments for Vehicle 1	17a.	· ·	752.81
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify: Gym Membership	17c.		20.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	10	¢.	0.00
40		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· .	
19.		r payments you make to support others who do not live with you.	10	\$	0.00
20	Spec	·	19.	Incomo	
20.		real property expenses not included in lines 4 or 5 of this form or on Sched Mortgages on other property	20a.		0.00
		Real estate taxes	20a. 20b.		0.00
		Property, homeowner's, or renter's insurance	20b. 20c.	· ·	
					0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
04		Homeowner's association or condominium dues	20e.		0.00
21.	Othe	Specify:	21.	+\$	0.00
22.	Calc	ılate your monthly expenses			
	22a.	Add lines 4 through 21.		\$	3,814.81
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c	Add line 22a and 22b. The result is your monthly expenses.		\$	3,814.81
					3,014.01
23.		ılate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,839.66
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,814.81
	00	Outros to some monthly company to the state of the state			
	23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	24.85
		The result is your monthly net income.	200.	<u> </u>	2-100
24.	Do ve	ou expect an increase or decrease in your expenses within the year after you	file this	form?	
Δ-Τ.		ample, do you expect to finish paying for your car loan within the year or do you expect your n			ase or decrease because of a
		cation to the terms of your mortgage?	5 5 1		
	■ No	).			
	□Y€				

# Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 35 of 56

Fill in this infor	rmation to identify your	caso:			
		case.			
Debtor 1	Joseph Solak First Name	Middle Name	Last Name		
Debtor 2	i iist ivailie	Middle Name	Last Ivallie		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
· You must file th obtaining mone	is form whenever you fi	n connection with a bank	s or amended schedule	s. Making a false statemen	t, concealing property, or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules fil	ed with this declaration an	d
X /s/ Jos	seph Solak		x		
Josep	h Solak ure of Debtor 1		Signature of	f Debtor 2	
Date	October 14, 2016		Date		

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 36 of 56

Fill i	n this inforn	nation to identify you	r case:			
Debte	or 1	Joseph Solak				
		First Name	Middle Name	Last Name		
Debte (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	number					
(if know					-	Check if this is an mended filing
	cial Fo		Affairs for Indivic	luals Filing for B	ankruntev	4/1
						4/10
inforr	nation. If m	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
numb	er (if knowr	n). Answer every que	stion.			
Part	1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1. V	What is you	current marital statu	ıs?			
[	☐ Married					
Ī	■ Not mar	ried				
2. [	Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ Na					
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
3. V	Nithin the Is	et 8 vears did vou ex		ial equivalent in a commun	ity property state or territor	
					ico, Texas, Washington and V	
ı	No					
[	_	ike sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Evnlai	n the Sources of You	r Income			
I ait	Explai	True dources or rou	i ilicollic			
F	fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$49,433.13	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document

Page 37 of 56 Case number (if known) Debtor 1 Joseph Solak

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	ndar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$71,388.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a l	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$69,590.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
	and other winnings.  List each	public bene If you are fi	efit payments; ling a joint ca the gross inc	ther that income is taxable. Exa ; pensions; rental income; inter ise and you have income that y come from each source separa	rest; dividends; money collectory course to the collectory ou received together, list it	cted from lawsuits; only once under De	royalties; an ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc. Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments You	u Made Before You Filed for	Bankruptcy			
3.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor l primarily for a	2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househole fore you filed for bankruptcy, di	umer debts. Consumer deb ld purpose."			1(8) as "incurred by an
		□ No.	Go to line		, , ,	, ,		
		Yes	paid that c not include	each creditor to whom you pai reditor. Do not include paymer e payments to an attorney for th nt on 4/01/19 and every 3 years	nts for domestic support obli nis bankruptcy case.	gations, such as ch	ild support a	and alimony. Also, do
	■ Yes.			or both have primarily consu		of after the date of	aujustinoni	•
		· ·	90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a tota	al of \$600 or more?		
		□ No.	Go to line					
		■ Yes	include pa	each creditor to whom you pai yments for domestic support of or this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for
	Ally Fin Po Box Bloomi		I 55438	8/2016-10/201	•	\$44,777.00	☐ Mortgag ☐ Car ☐ Credit ( ☐ Loan R ☐ Supplie ☐ Other_	Card epayment ers or vendors

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document

Page 38 of 56
Case number (if known) Debtor 1 Joseph Solak

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for			
	Don 9394 Barley Mills Road Arlington, TN 38002	8/2016-10/2016	\$2,960.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ■ Other Re	ord payment or vendors			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	No No								
	Yes. List all payments to an insider.				_				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider		ments or transfer a	any property on a	count of a de	ebt that benefited an			
	,.,	Dates of neument	Total amount	Amount vou	December for	this payment			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment itor's name			
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		oreclosed, garnis	hed, attached	l, seized, or levied?  Value of the property			
		Explain what happened	d						
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No ■ Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	mounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount			
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess	ion of an assigned	e for the bene	fit of creditors, a			

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Page 39 of 56 Document Debtor 1 Joseph Solak Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? □ No Yes. Fill in the details for each gift or contribution. Describe what you contributed Gifts or contributions to charities that total Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) **Montly Tithes** Monthy \$20.00 St. Hedwig 2226 N Hoyne Ave Chicago, IL 60647 Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes Fill in the details Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Attorney Fees** 8/2016 \$1,450.00 **Upright Law LLC** 79 West Monroe Fifith Floor Chicago, IL 60603 dgallagher@uprightlaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who

promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

**Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made

Entered 10/14/16 13:56:29 Doc 1 Filed 10/14/16 Desc Main Case 16-32841 Page 40 of 56
Case number (if known) Document

Debtor 1 Joseph Solak

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b	ousiness or financial affa	airs?					
	Include both outright transfers and transfers minclude gifts and transfers that you have alread  No			security int	erest or mortgage on you	r property). Do no	ot	
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer made	was	
	Person's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a	self-settle	d trust or similar device	of which you ar	e a	
	No Yes Fill in the details							
	Yes. Fill in the details.  Name of trust	Description and v	alue of the pror	nerty trans	eferred	Date Transfer	was	
	Nume of trust	Description and V	raide of the prop	ocity trails	incirio d	made	was	
Par	t 8: List of Certain Financial Accounts, In:	struments, Safe Deposi	t Boxes, and Sto	orage Unit	s			
20.	Within 1 year before you filed for bankrupto	v. were any financial ac	counts or instru	uments he	ld in vour name, or for v	our benefit, clos	sed.	
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokera houses, pension funds, cooperatives, associations, and other financial institutions.								
	nouses, pension funds, cooperatives, associations, and other financial institutions.							
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last bal before closi tra		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, an	ny safe dep	oosit box or other depos	itory for securit	ies,	
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	I	
22.	Have you stored property in a storage unit	or place other than your	home within 1	year befor	e you filed for bankrupt	cy?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility	Who else has or h	had access	Describe	the contents	Do you still	ı	
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)		20001130	ano comonic	have it?	•	
Par	t 9: Identify Property You Hold or Control	for Someone Else						
23.			ude any propert	y you borr	rowed from, are storing	for, or hold in tr	ust	
	■ No □ Yes. Fill in the details.							
	Owner's Name	Where is the pror	perty?	Describe	the property	,	Value	
	Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		vaiue	
Par	t 10: Give Details About Environmental Info	ormation						
For	the purpose of Part 10, the following definiti	ons apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 41 of 56

Case number (if known)

Debtor 1 Joseph Solak

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Address (Number, Street, City, State and ZIP Code)  ZPCOSE (Number, Street, City, State and ZIP Code)  ZPCOSE (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code)  Part 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.		naza	irdous materiai, poliutant, contaminant,	or similar term.					
No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Nature of the case  Status case  Status Case Title Case Number  Nature of the case  Status Case Title Case Number Address (Number, Street, City, State and ZIP Code)  Nature of the case  Status case  Nature of the case  Status case  Address (Number, Street, City, State and ZIP Code)  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of al limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name  Address (Number, Street, City, State and ZIP Code)  Name Address  Name of accountant or bookkeeper  Date Issued  Address  Name Address  Name Address  Name Address  Name Date Issued	Repo	teport all notices, releases, and proceedings that you know about, regardless of when they occurred.							
Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and	24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
Address (Number, Street, City, State and ZIP Code)  275. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number Address (Number, Street, City, State and ZIP Code)  Part 11: Sive Details About Your Business or Connections to Any Business  27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business Address (Number, Street, City, State and ZIP Code)  A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper  No Yes. Fill in the details below. Name Address Date Issued Address Date Issued									
No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Nature of the case Status case  Status case  Status case  Nature of the case Status case  Nature of the case Status case  Nature of the case Status case  Nature of the case Status case  Nature of the case Status case  Status case  Nature of the case Status case  Nature of the case Status case  Status case  Nature of the case Status case  Nature of the case Status case  Status case  Nature of the case Status case  Status case  Nature of the case Status case  Status case  Nature of the case Status case  Status case  Nature of the case Status case  Status case  Status case  Nature of the case Status case  Status case  Status case  Nature of the case Status case  Status case  Status case  Status case  Status case  Nature of the case Status case  Status				Address (Number, Street, City, State an	d		Date of notice		
Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Case Number   Court or agency   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business   Address   Name of accountant or bookkeeper   Dates business existed   No   Yes. Fill in the details below.   Name   Date Issued   Date Issued   Date Issued   Date Issued   Name   Date Issued   Date Issued   Name	25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Court or agency Name Address (Number, Street, City, State and ZIP Code)  Court or agency Name Address (Number, Street, City, State and ZIP Code)  Replication or agency Name Address (Number, Street, City, State and ZIP Code)  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business  The partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business Name of accountant or bookkeeper  No Yes. Fill in the details below. Name Date Issued Address  Date Issued  Date Issued									
No				Address (Number, Street, City, State an	d		Date of notice		
Yes. Fill in the details.   Case Title Case Number	26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and					nd orders.			
Case Number    Name Address (Number, Street, City, State and ZIP Code)									
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name				Name Address (Number, Street, City,	Na	ture of the case	Status of the case		
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time         □ A member of a limited liability company (LLC) or limited liability partnership (LLP)         □ A partner in a partnership         □ An officer, director, or managing executive of a corporation         □ An owner of at least 5% of the voting or equity securities of a corporation         ■ No. None of the above applies. Go to Part 12.         □ Yes. Check all that apply above and fill in the details below for each business.         Business Name Address       Describe the nature of the business Name Address         Name of accountant or bookkeeper       Do not include Social Security number of Dates business existed         28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.         ■ No       Yes. Fill in the details below.         Name       Date Issued	Par	11:	Give Details About Your Business or	Connections to Any Business					
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)         ☐ A partner in a partnership         ☐ An officer, director, or managing executive of a corporation         ☐ An owner of at least 5% of the voting or equity securities of a corporation         ☐ No. None of the above applies. Go to Part 12.         ☐ Yes. Check all that apply above and fill in the details below for each business.         Business Name Address (Number, Street, City, State and ZIP Code)       Describe the nature of the business Name of accountant or bookkeeper         Name of accountant or bookkeeper       Dates business existed     28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address  Date Issued  Address	27.	With	in 4 years before you filed for bankrupt	cy, did you own a business or have ar	ny of	the following connections to any	business?		
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.  No □ Yes. Fill in the details below. Name Address  Date Issued			☐ A sole proprietor or self-employed in	n a trade, profession, or other activity	eith	er full-time or part-time			
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper  Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Name Address  No □ Yes. Fill in the details below.  Name Address  Date Issued			☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	.LP)			
□ An owner of at least 5% of the voting or equity securities of a corporation  ■ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.  Name Address  Date Issued			☐ A partner in a partnership						
No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  Employer Identification number Do not include Social Security number of Do not include Social Security number of Dates business existed  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  No Yes. Fill in the details below.  Date Issued			☐ An officer, director, or managing exe	ecutive of a corporation					
Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Notine Tyes. Fill in the details below.  Name Address  Date Issued			☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Do not include Social Security number of Do not include Social Secu			No. None of the above applies. Go to P	art 12.					
Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address  Do not include Social Security number of Dates business existed  Date Issued			Yes. Check all that apply above and fill	in the details below for each busines	s.				
Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address  Date Issued				Describe the nature of the business					
institutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.  Name Address				Name of accountant or bookkeeper			idiliber of friit.		
☐ Yes. Fill in the details below.  Name Address  Date Issued				cy, did you give a financial statement	to ar	nyone about your business? Inclu	de all financial		
Name Date Issued Address									
(Hamber, Greet, Grey, State and Em Good)		Add	me	Date Issued					

Part 12: Sign Below

Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Case 16-32841 Doc 1 Page 42 of 56 Case number (if known) Document

Debtor 1 Joseph Solak

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jo	seph Solak	
Jose	ph Solak	Signature of Debtor 2
Signa	ture of Debtor 1	
Date	October 14, 2016	Date
Did yo	u attach additional pa	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes	3	
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes	s. Name of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 43 of 56

Fill in this inform	nation to identify your	case:		
Debtor 1	Joseph Solak			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official For Statemen		n for Indiv	∕iduals Filing Under Chap	ter 7 12/15
If you are an indiv	vidual filing under cha	pter 7, you must fil	Il out this form if:	
	claims secured by yo	-		
You must file this	ver is earlier, unless th	ithin 30 days after	not expired.  you file your bankruptcy petition or by the date the time for cause. You must also send copies to	
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying correc	t information. Both debtors must
	nd accurate as possib our name and case nur		s needed, attach a separate sheet to this form. C	On the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	e Secured Claims		
For any credito information bel		art 1 of Schedule D	2: Creditors Who Have Claims Secured by Prope	erty (Official Form 106D), fill in the
	ditor and the property the	hat is collateral	What do you intend to do with the property the secures a debt?	nat Did you claim the property as exempt on Schedule C?
Creditor's AI	lly Financial		☐ Surrender the property.	□No
name:	,		Retain the property and redeem it.	
Description of	2015 Jeep Grand C		Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	Laredo 10,100 mile Value According to		■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f) Reta and Pay Pursuant to Contract	in
Creditor's AI	lly Financial		Commended the research	□ Na
name:	ly Financial		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of	2013 Chrysler 200	65.000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	Value According to		Retain the property and [explain]:	
securing debt:	Jointly Signed with	n Brother, his	Retain and Pay Pursuant Contract	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

## Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 44 of 56

Debtor 1	Joseph Solak	Case number (if known)	
Describ	e your unexpired personal property leases		Will the lease be assumed?
Lessor's	name:		□ No
Descript Property	ion of leased :		☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Lessor's			□ No
Property	ion of leased :		☐ Yes
Lessor's	name: ion of leased		□ No
Property			☐ Yes
Part 3:	Sign Below		
Under pe	enalty of perjury, I declare that I have indicated my intention	about any property of my estate that se	cures a debt and any personal
property	that is subject to an unexpired lease.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Joseph Solak	<b>x</b>	
	seph Solak nature of Debtor 1	Signature of Debtor 2	
Dat	October 14, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	<b>'</b> :	Liquidation
\$2	245	filing fee
\$	75	administrative fee
+ 9	\$15	trustee surcharge
\$3	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-32841 Doc 1 Filed 10/14/16 Entered 10/14/16 13:56:29 Desc Main Document Page 49 of 56

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Joseph Solak		Case No.		
		Debtor(s)	Chapter	7	_
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DI	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	Э
	For legal services, I have agreed to accept		\$	1,450.00	
	Prior to the filing of this statement I have received	ed	\$	1,450.00	
	Balance Due			0.00	
2. \$	<b>335.00</b> of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. ■	I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mem	bers and associates of my law fir	m.
[	☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the				
6. I	n return for the above-disclosed fee, I have agreed to	o render legal service for all aspects	s of the bankruptcy	case, including:	
b c.	<ul> <li>Analysis of the debtor's financial situation, and representation and filing of any petition, schedules, so Representation of the debtor at the meeting of credit [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applica 522(f)(2)(A) for avoidance of liens on the secure of the sec</li></ul>	statement of affairs and plan which ditors and confirmation hearing, an o reduce to market value; exe ations as needed; preparation	may be required; and any adjourned hea	rings thereof;	
7. B	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions o	or
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in	
Oc	ctober 14, 2016	/s/ David Gallagho	er		
Da	·	David Gallagher			
		Signature of Attorne Upright Law LLC	У		
		79 West Monroe			
		Fifith Floor Chicago, IL 60603	2		
		312-546-4264 Fa			
		dgallagher@uprig	ghtlaw.com		
		Name of law firm			



## **ALLEN CHERN LAW**

### ATTORNEY CLIENT BASE RETAINER AGREEMENT FOR CHAPTER 7 BANKRUPTCY RELATED SERVICES

This Agreement is executed between Law Solutions Chicago, LLC (as an Illinois Limited Liability Company, also d/b/a Law Solutions, Law Solutions PLLC, Jason Allen Law, Jason Allen Law PLLC) and the undersigned ("Client" or "Debtor"), collectively the "Parties". This agreement contemplates bankruptcy related services ("Bankruptcy Services" or "Services") ONLY and no other services. Firm is not retained to represent Client in any other legal proceedings. Firm will NOT take any action outside of Services described in this Base Retainer Agreement ("Agreement"). Client acknowledges that no creditor actions including letters, utility shut-off's, garnishments, repossessions, taxing authority's actions, or foreclosure sales will be stopped until the petition is filed. Client is responsible for informing Firm of any critical dates including foreclosure sale dates.

- 1. Type of Bankruptcy Representation and Venue. Client retains Firm, (and not any specific attorney/staff member), and any Associates/Co-counsel which Firm may choose to share professional responsibility and fees, to represent Client for Bankruptcy Services. This Agreement is subject to Client residing in Client's current county of residence for the duration of the Services. If Client determines at a later date that Client desires to file or convert to a Chapter 13, the parties shall execute a new retainer agreement. This Agreement does not include representation in any objection to discharge, audit, adversary proceeding, or any contested matter. Firm will require an upfront retainer if Firm agrees to represent client in any other matter.
- 2. Type of Retainer Fee ("Retainer" or "Fee"). Client retains Firm under a General Retainer knows as a "ADVANCED PAYMENT" or "FLAT FEE" RETAINER whereby Firm agrees to provide Services for a fixed amount. Firm is retained on a flat fee basis and not on an hourly basis unless otherwise indicated in this Agreement, and is therefore NOT charging its usual hourly rates of \$395.00 per hour for attorney time and \$125.00 for paraprofessional time. Client agrees that as soon as Client retains Firm, Firm will charge for the consultation that was free until the signing of this document. Client further understands that upon retention, Firm will re-review all intake documents and Client information, set up payment plans in Firm's case management system, and perform other administrative tasks associated with opening Client's file. If Client terminates Firm's services, Firm will perform legal and administrative services associated with closing Clients matter. Client understands that the time associated with opening and closing Client's matter will amount to no less than 2 hours of time. Client expressly waives any rights to any accounting or monthly billing of time spent on this matter. Firm may not keep records of time spent on this matter. Time will be estimated and hourly rates will be used in the event of any fee dispute. The Fee is earned when paid and immediately becomes property of the Firm and is non-refundable. Fees will be placed into Firm's general expense/operating account and may NOT be placed into any Firm IOLTA client trust fund account, or any other type of Trust or Escrow account and Firm may elect not to hold funds on Client's behalf. Client has no claims to any money paid to Firm. The Retainer is paid by Client to the Firm in order to ensure Firm's commitment of availability for a time period, representation for Services, assumption of Professional Responsibility, and consultation. The Retainer is an estimate based upon the information provided by Client at the consultation and in the information intake sheet and may be adjusted upward by several factors including (i) required services beyond the Bankruptcy Services defined herein, (ii) undisclosed assets, income, debts, transfers and preferences, (iii) failure to pay all the fees and costs within the prescribed time; (iv) creditors exceeding 25 in number, or; (v) additional unsecured debt 20% in excess of amounts indicated by Client at the consultation charged at two and one half (2.5%) of the additional unsecured debt. The Retainer is based on the following assumptions: (a) the Client has provided the Firm with complete and accurate information and fully disclosed all financial information to Firm; (b) the Client's circumstances, particularly the Client's current monthly income does not substantially change prior to the filing of the petition; (c) client provides all requested documents within 15 days of the date of this Agreement. Client acknowledges that Client has 60 days from Client's final payment of Fees to turn in all requested documents or will be charged an additional Fee of \$375.00.No Chapter 7 petition will be filed until all Fees and costs are paid in full and Client provides all documents. Firm assumes no responsibility for any changes in laws should client delay the filing by not paying quickly and providing required documentation.
- 4. Payment Term. The Retainer must be paid in full within 6 months from the date of this Agreement after which, it terminates with no further notice or obligations due from either party. Client authorizes LS to make changes to any payment schedule and take payments with verbal authorization.

Ini	frien!	 g :	
		 500	



## **ALLEN CHERN LAW**

- 4. Refund Policy. All compensation forwarded and paid to Firm constitute earned compensation upon receipt by Firm and become property of the Firm. Therefore Firm is not obligated to refund any portion to Client regardless of when or in what manner this matter may be concluded, or this agreement terminated, Upon receiving a written request for a refund specifically stating that Fees were unreasonable (and for no other reason), Firm shall perform an accounting of its services and provide debtor either with an explanation as to the reasonableness of the Fees or a refund within 30 days from the request.
- 5. Due Diligence. Firm may investigate/verify the information provided by Client via third party sources and is authorized to amend information provided by Client as a result of its investigation. Firm may order (at Client's expense), or request client order, due diligence documentation/items, including but not limited to appraisals, real estate and auto valuations, credit checks, tax transcripts, asset searches and anything firm deems appropriate to confirm Client information. If not provided by Client within 30 days of request, or at Client's request, Firm, at it's discretion is authorized certain due diligence products. Firm will charge \$50 for single filer credit report, \$75 for a joint filer credit report, \$50 for a CMA, and \$50 for taxes.
- 6. Debtor's Obligations to Pay Designated Costs/Fees/Due Diligence. In addition to the Retainer, the Client shall be obligated to obtain/pay for the following items: (a) Pre-filing consumer credit counseling; (b) post-filing debtor education instructional course; (d) tax transcripts; (e) public record, asset/lien searches; (f) copies of judgments, deeds, deeds of trust, title certificates, court papers, county tax records, appraisals, broker price opinions (BPO), auto valuations, and other similar documents; (g) any other records or statements not produced by Client; (h) administrative costs, i,e, postage, parking, copies, gas limited to a flat fee of \$100; (i) court costs related to the potential filing of a Chapter 7 bankruptcy case (currently \$306.00); and (j) cost of amended schedules (\$176.00).
- 7. Bankruptcy Services further defined. The Services included in the Retainer are (a) informing Client of Client's rights and responsibilities under the Bankruptcy Laws; (b) providing consultation to enable the Client to make an informed decision about filing Chapter 7; (c) advising Client of all available exemptions; (d) assisting the Client in complying with all of the requirements imposed by the Bankruptcy Laws and Rules, (e) preparing and electronically filing all bankruptcy documents; (f) drafting and mailing notice to creditors; (g) notifying Client of, preparing Client for, and attending only THE ORIGINAL Section 341 meeting of creditors; (h) assisting Client in complying with information requests by the Bankruptcy Trustee, the Court, or other parties; (i) communicating with all parties involved in the case; (j) reviewing of Bankruptcy Petition and Schedules; (k) sending any pre-filing correspondence; (l) calculating Current Monthly Income to determine if any presumption of abuse would arise under the bankruptcy code. Client has received a free consultation without any obligation to retain Firm. Client agrees that the consultation time is now part of the Bankruptcy Services. As to subsection (g) of this section, Debtor expressly authorizes Firm to utilize outside counsel to appear on Client's behalf at creditor meetings and hearings, at no additional cost to Client.
- 8. Additional or Non-Base Legal Services POST-PETITION. Legal services which are beyond those contemplated in the Base Retainer may be provided by Attorney POST PETITION at an additional fee, including but not limited to representing Client in: (a) Discharge proceedings, including those related to student loans, taxes or undue hardships; (b) motions for relief from, or continuation, defense or enforcement of the Automatic Stay (c) motions to redeem personal property(\$600.00); (d) rule 2004 examinations; (e) motions to avoid liens/judgments(\$500.00); (f) contested matters or adversary proceedings; (g) contested matters regarding Client's claim of exempt property; (h) filing any amendments to the schedules; (i) motions to continue the 341 meeting of creditors and/or appearing for a continued 341 hearing(\$150.00); (j) motions or adversary complaints to abandon/refinance/sell/purchase property; (k) assisting in carrying out the Debtor's Statement of Intentions; (1) monitoring an "asset case"; (m) re-opening a bankruptcy case to submit post-filing proof of pre-discharge counseling; (n) issues that arise that are not specifically listed in the Retainer. For such non-base services, you will be charged \$395.00 per hour for attorney time and \$125/hour for paraprofessional time billed in 6-minute minimum increments, however, the Firm will be entitled to contingency fee of 25% of garnishment recoveries. The Firm will be entitled to a contingency fee equal to 50% of any actual recovery from any party for a violation of the automatic stay, the discharge injunction, or for breach of any state/federal consumer protection statutes or bankruptcy code violations. Court costs and filing fees may be advanced by Firm and be reimbursed out of Client's share of settlement/judgment proceeds. Client hereby authorizes Firm, but does not require it, to investigate for the existence of such violations, prosecute them with or without the assistance of such independent co-counsel as Firm deems necessary to pursue such claims and share fees accordingly.
- 9. Reaffirmation Agreements. Firm is not retained to negotiate, review, execute any re-affirmation agreements with Client's creditor's, or to appear at any reaffirmation hearings. Firm charges \$150.00 per signed reaffirmation. If Firm negotiates any Reaffirmation Agreements,



## **ALLEN CHERN LAW**

Client will pay the hourly rate of Firm. Client understands Creditors are not obligated to offer re-affirmation agreements and it is Client's responsibility to retain Firm for reaffirmation agreement help and to follow up with Firm regarding it. Unless Client retains firm to file a reaffirmation agreement signed by BOTH creditor and Client, Client and Firm shall presume no reaffirmation agreement exists or was requested by client. Client should continue to make payments on items Client desires to reaffirm, obtain an executed reaffirmation agreement, or risk losing said items. Client agrees the Firm has no obligation to execute any reaffirmation agreement and reserves the right NOT to sign/execute any reaffirmation agreement on behalf of Client.

- 10. Receipt and Acknowledgement of Mandatory Notices and Disclosures. The Bankruptcy Code as amended effective 10/17/2005 requires that Firm provide mandatory notices and disclosures to Client. Client acknowledges that Client has received, read, and understands the two documents titled Statement Mandated by Section 527(b) of the Bankruptcy Code and Notice to Clients Who Contemplate filing Bankruptcy. Such disclosures are acknowledged by Client, and are incorporated by reference and made part of this Agreement.
- 11. Client Representations of Good Faith and to Firm. Client attests and affirms that they have not given Firm any false or misleading information or omitted any information from Firm. If Client is making payment arrangements, Client agrees to "auto pay" via debit card or ACH from a checking account, set up with Firm's billing department as part of Firm's willingness to take payments and any payments sent by check may be converted and processed by Firm as an ACH or "V-Check" transaction.
- 12. NSF Checks. Client agrees to pay a \$50.00 for dishonored checks and Client plus fees/costs associated with collection, thereof, and any other balance due on this account, including but not limited to attorney fees and court costs, with a minimum fee of \$500.00 for additional attorney fees.
- 13. Retention and Disposition of Records. Firm maintains files for three (3) years starting from the date the case is closed. Firm encourages Client to keep and maintain copies of all bankruptcy related matters. Firm reserves the right to destroy all contents of the file after three (3) years. Client may request a copy of the file or any documents within the file by sending a written request with a retrieval and duplication fee of \$50. Firm satisfies such requests within thirty (30) days of receipt. Client may expedite delivery to under ten days by paying \$75 per request.
- 14. Limited Power of Attorney. Client agrees that the signature on this contract also grants Firm a limited power of attorney to affix its signature to any authorization forms required to (a) obtain tax information from any third party tax preparer, accountant, the state or federal taxing authority or any other party in possession of any type of tax information/returns related to Client, including, but not limited to copies of Client's tax returns and/or transcripts, and 2) obtain due diligence products from third parties including, but not limited to, real estate appraisals and/or comparative market analyses, title searches, asset searches, personal property valuations, and credit reports.

15. I/WE UNDERSTAND THAT THE INFORMATION DISCLOSED IN THE PETITION IS GIVEN UNDER PENALTY OF PERJURY AND THAT THE FEDERAL PENALTY FOR PERJURY MAY INCLUDE IMPRISONMENT AND HEAVY FINES.

\${ 1785 } Retainer Amount per the executed Agreement between	een the Parties
(-) 1785 Deposit Paid: Debit / Other To be processed after contract is	received If in Person then Received By / Attorney Name:
= \${ 0 } Balance Due on the Retainer per Agreement (does not in	nclude costs, expense, due diligence or court filing fees)
Client states their Total Unsecured Debt is \${ 57,000 } or, if blank, the	
I/we acknowledge to have read, reviewed, understand and received an exa	act completed copy of both pages of this Agreement.
Chapter 7 / Chapter 13 (circle one) Joseph Solak	

X Joseph St	date 8/9/16	
Joseph Sofak (debtor)		by:
x	date	(attorney)
(joint debtor)		

## **United States Bankruptcy Court**Northern District of Illinois

		Not then District of Inhibis		
In re	Joseph Solak		Case No.	
		Debtor(s)	Chapter	7
	VI	ERIFICATION OF CREDITOR M	<b>MATRIX</b>	
		Number of	f Creditors: _	26
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of credi	itors is true and	correct to the best of my
Date:	October 14, 2016	/s/ Joseph Solak Joseph Solak		

Ally Financial Po Box 380901 Bloomington, MN 55438

Ally Financial Po Box 380901 Bloomington, MN 55438

Amex Correspondence Po Box 981540 El Paso, TX 79998

Avant Credit, Inc 640 N La Salle St Suite 535 Chicago, IL 60654

Capital One Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank North America Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179 Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

City of Chicago EMS 33589 Treasury Ctr. Chicago, IL 60694

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Discover Financial Po Box 3025 New Albany, OH 43054

First National Bank Attn: FNN Legal Dept 1620 Dodge St Mailstop Code 3290 Omaha, NE 68191

Ford Credit National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

Loan Depot 26642 Towne Centre Drive Foothill Ranch, CA 92610

Merrick Bank Po Box 9201 Old Bethpage, NY 11804

Rcs/michael Hill 30 Oakbrook Ctr Oak Brook, IL 60523 Sweedish Covenant Hospital 5145 N California Ave Chicago, IL 60625

Synchrony Bank Po Box 965064 Orlando, FL 32896

Synchrony Bank/ JC Penneys Po Box 965064 Orlando, FL 32896

Synchrony Bank/QVC Po Box 965064 Orlando, FL 32896

Synchrony Bank/Sams Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Po Box 965064 Orlando, FL 32896